## 

	PATENT.A	Application or Docket Number										
CLAIMS AS FILED - PART I (Column 1)								SMALL ENTITY TYPE		OR	OTHER THAN	
TOTAL CLAIMS			16				Г	RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		B	ASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			/6 minus 20=		. 0			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =		0		ı	X42=		OR	X84≈	
MULTIPLE DEPENDENT CLAIM P			RESENT					+140=		OR	+280=	_
* If the difference in column 1 is			less than zero, enter "0" in			olumn 2	L	TOTAL		OR	TOTAL	740
CLAIMS AS AMENDED - PART II							<del></del>		,	OTHER		
(Column 1) (Column 2) (Column 3)						_ =	MALL		OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š	Total	. 18	Minus	** /	20	- /	Γ	X\$ 9=	,	OR	X\$18=	
	Independent	• /	Minus	***	3	•/		X42=	1	OR	X84=	
Ш	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=.	(	OR	+280=	
andtfilled 8/16/05 ME						L	TOTAL	<del> </del>	OR	YOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)								OT. FEE	<del></del>	•	nouri. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIG NUM PREV	HEST MBER HOUSLY D FOR	PRESENT EXTRA	·	RATE	ADDI- TIONAL FEÈ		RATE	ADDI- TIONAL FEE
DME	Total	- 18	Minus		2ð			X\$ 9=		OR	X\$18=	1
MEN	Independent	• /	Minus		3	2		X42=		OR	X84=	1
	FIRST PRESE	NTATION OF MI	ULTIPLE DEF	PENDEN	T CLAIM			+140=		OR	+280=	/
							<u></u>	TOTAL	_	OR	TOTAL ADDIT. FEE	
		(Column 1)		(Coli	ımn 2)	(Column 3)	AL	OOIT. FEE		-	ADDII. FEE	
AMENDMENT C	COURTIN TY CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI		HEST MBER HOUSLY D FOR	BER PRESENT EXTRA		RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE
OM	Total	*	Minus	444		5		X\$ 9≖		OR	X\$18≈	
ME	Independent	•	Minus	***		s·	-	X42=		OR	X84=	
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-				1280-	<u> </u>
	If the entry in colu	mn 1 is less than t	he entry in colu	ımın 2. wri	te "O" in ca	tumn 3.	L	+140= TOTAL		OR	+280=	
**	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box										ADDIT. FEE	

FORM PTO-875 (Rev. 8/01)

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